MISSOURI DIVISION OF WORKERS' COMPENSATION



2016 ANNUAL REPORT

Table of Contents

Narrative

Tables & Figures

WC Premium Rate Ranking50

Introduction	3	WC Administration Fund Assessments & Expenditures	9
Organizational Chart	5	Second Injury Fund Assessments & Expenditures	
Biographies		First Reports of Injury	
• .		First Reports of Injury by Industry	
Administration		First Reports of Injury by IndustryFirst Reports of Injury by Body Part	
Assessments & Expenditures	9	First Reports of Injury by Age & Gender	
WC Administration Fund	9	Claims for Compensation	
Second Injury Fund	10	Claims for Compensation by Industry	
Workers' Compensation		Claims for Compensation by Body Part	16
·		Claims for Compensation Resolutions	
First Reports of Injury		Occupational Disease Claims	
Claims for Compensation	15	Occupational Disease Cases Due to Toxic Exposure	
Occupational Disease Claims	18	Occupational Disease Claims by Injury	
Fatalities	20	Occupational Disease Claims by Industry	
Second Injury Fund (SIF)		Fatalities Fatalities by Age & Gender	
		Fatalities by Industry	
Claims		Second Injury Fund Claims	
Resolutions	23	Second Injury Fund Claim Resolutions	
Benefit Payments	24	Second Injury Fund PTD Payments	24
Recovery Payments	27	Second Injury Fund PPD Payments	
•		Second Injury Fund Death Payments	
Fraud and Noncompliance (F & N)		Second Injury Fund Rehabilitation Payments	
Insurance	33	Second Injury Fund Second Job Wage Loss Payments	
Legal	35	Second Injury Fund Medical Payments	
Line of Duty Compensation Fund	37	Fraud & Noncompliance (F & N) Cases Received F & N Cases Administratively Closed	
Customer Service		F & N Cases Referred to Attorney General	
		F & N Referrals to AGO by Party or Industry	
Toll-Free Line		Successful F & N Prosecutions	
Dispute Management	40	F & N Deferred Prosecutions & Hold Harmless Agreements	s 31
Voluntary Mediation	40	F & N Penalties Received	
Workers' Safety Program (MWSP)	42	Self-Insurance Program Statistics	
Adjudication		Individual Self-Insurers by Industry	
•		Religious Exception Program Statistics	
Docket Settings & Hearings	45	Reasonableness Medical Fee DisputesLine of Duty Compensation Fund Statistics	
Case Resolutions	47	Toll-Free Line Calls	
Tort Victims' Compensation Fund	48	Referrals for Voluntary Dispute Management Assistance	
Accomplishments and Initiatives		Cause of Referrals	
		Source of Referrals	41
Interstate Comparison		Voluntary Dispute Referral Outcomes	
MO DWC Contacts	51	Workers' Safety Program Site Visit Locations	
		Docket Settings & Hearings by Location	
		WC Case Resolutions	47



Introduction

Mission Statement: "To Promote and Protect Industry and Labor"

The Missouri Workers' Compensation Law is the exclusive remedy for employers and employees to adjudicate and resolve disputes relating to injuries, illnesses or occupational diseases that arise out of and in the course of employment. Senate Bill 1, 97th Gen. Assembly, 1st Reg. Sess. (2013), made several changes to the law, effective January 1, 2014 (SB 1)¹. Occupational diseases were added to the exclusive remedy provision under the law as set out in §§287.120.1 and 287.120.2. In addition, §287.067.2 was amended to state that an injury or death by occupational disease is compensable only if the occupational exposure was the prevailing factor in causing both the resulting medical condition and disability.

Any reference to employers includes the workers' compensation insurance carrier, Division of Workers' Compensation (Division) approved individual self-insured employer or group trusts, as the case may be. The workers' compensation law applies to all employers that have five or more employees. Construction industry employers who erect, demolish, alter or repair improvements are subject to the law if they employ one or more employees. Partners and sole proprietors may individually elect to obtain coverage. The law does exempt a very small and very specific group of employees, which includes farm laborers, domestic servants, certain real estate agents and direct sellers and commercial motor-carrier owner-operators. Please refer to §287.090 for additional information.

All employers subject to the law must insure their entire workers' compensation obligations or liabilities under the law with an insurance carrier that is authorized to provide such services in the state of Missouri, by the Missouri Department of Insurance, Financial Institutions and Professional Registration, or meet the requirements of the Division to be granted self-insurance authority. SB 1 amended §287.280.1 to permit an employer to insure in whole or in part their employer liability, under a policy of insurance or a self-insurance plan. SB 1 also grants an employer the option to reject mesothelioma liability and if the employer rejects this liability, the exclusive remedy provision of the Workers' Compensation Law does not apply. SB 1 grants the employer the option to accept mesothelioma liability by either insuring their liability by purchasing insurance coverage with an insurance carrier; qualifying as a self-insurer; or by becoming a member of a group insurance pool that complies with the requirements of §287.223. This section creates the Missouri Mesothelioma Risk Management Fund.

¹ Throughout the Annual Report, changes made to the Law by SB 1 are referenced, where applicable. All references are to Missouri Revised Statutes, RSMo (2014) unless otherwise stated.

The Division administers the Workers' Compensation Law. The Division has seven adjudication offices equipped to render services to employees and employers. The Division carries out its responsibilities through several programs and units, located primarily in Jefferson City, that provide services to all stakeholders. An administrative tax, not to exceed two percent, is imposed on employers to fund the administrative expenses of the Division associated with the administration of the Missouri Workers' Compensation Law.

Under the Missouri Workers' Compensation Law, an injured employee is entitled to receive medical benefits, temporary total disability benefits (TTD), and permanent partial disability (PPD) or permanent total disability benefits (PTD), respectively. The TTD benefits generally equal two-thirds of the injured employee's average weekly wage not to exceed a maximum rate set by the legislature. The average weekly wage is determined by examining various pay periods immediately preceding the date of injury. SB 1 established a new definitional provision contained in §287.020(11) relating to "occupational diseases due to toxic exposure" to include the following: mesothelioma, asbestosis, berylliosis, coal worker's pneumoconiosis, bronchiolitis obliterans, silicosis, silicotuberculosis, manganism, acute myelogenous leukemia, and myelodysplastic syndrome.

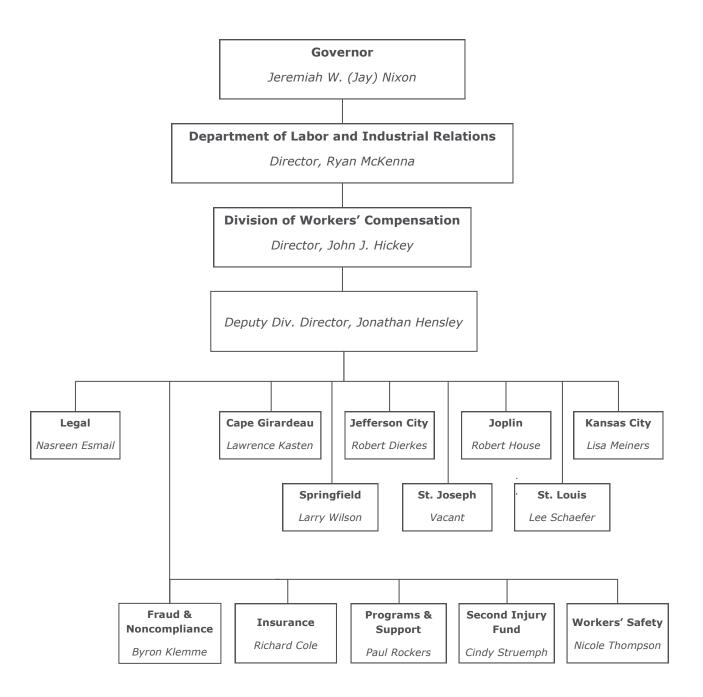
For all claims filed on or after January 1, 2014, for occupational diseases due to toxic exposure that result in PTD or death, an employee is entitled to such amount due to employee during his life based upon an award of PTD and death; except that the PTD and death shall only be paid when the enhanced benefits have been exhausted. The enhanced benefit for occupational disease due to toxic exposure *not including mesothelioma* is an amount equal to 200 percent of the state average weekly wage (SAWW) as of the date of diagnosis for 100 weeks. The enhanced benefit for occupational disease due to toxic exposure that *is diagnosed to be mesothelioma*, is an amount equal to 300 percent of the SAWW for 212 weeks. §287.200.4, *et seq*.

This report, as required by §287.680 briefly describes each of the programs and units and summarizes the transactions and proceedings undertaken for the year 2016. This report includes the statistical information collected by the Division where applicable².

 $^{^2}$ All tables, figures and data in this report were derived from documents filed and information reported to the Division of Workers' Compensation as required by law, unless otherwise noted. The techniques and analysis used are appropriate and reasonable based upon information currently available and as reported to the Division.



Organizational Chart



Biographies



Ryan McKenna

Director, Department of Labor & Industrial Relations

Ryan McKenna was named the Director of the Missouri Department of Labor and Industrial Relations in December 2013 by Governor Jay Nixon. Prior to his appointment, McKenna represented the constituents of Jefferson County in the Missouri Senate since 2006 and he was a member of the Missouri House of Representatives from 1998 to 2004. During his time as Senator, he served on several senate committees, including the Jobs, Economic Development and Local Government Committee. A Jefferson County native, McKenna is a graduate of Missouri State University and worked as a union laborer on highway and bridge construction before being elected to the General Assembly.



John J. Hickey

Director, Division of Workers' Compensation

John J. Hickey was appointed to serve as the Division of Workers' Compensation Director of the Missouri Department of Labor in 2011. Prior to this appointment, Hickey served as the employee representative commissioner on the Labor and Industrial Relations Commission for nine years. Hickey also represented the 80th District in the Missouri House of Representatives from 1993 to 2002. Hickey served on both the Workers' Compensation Committee and Labor Committee for 10 years and was Chairman for seven years.



Administration

DIVISION OF WORKERS' COMPENSATION

Jonathan Hensley, Deputy Div. Director

The Deputy Division Director reports to the Division Director and is responsible for the day-to-day operations of most units within the Division. This position works closely with management staff to optimize daily operations and ensure the Division's mission and goals are achieved.

PROGRAMS & SUPPORT

Paul Rockers, Manager

The Programs and Support Unit receives all filings made by the parties with the Division. This unit's functions include claims processing, database management, case review, imaging, electronic data interchange (EDI) monitoring, fulfilling copy work requests, and responding to inquiries by the Social Security Administration. This unit also oversees the Customer Service Unit, which handles all calls to the Division on the toll-free line, as well as, oversees the records in the Division's file room which are transferred to the Secretary of State's Office.

ADJUDICATION

The Division's statutory responsibility to adjudicate and resolve disputes under the law is fulfilled by the seven adjudication offices throughout the state of Missouri. The Administrative Law Judges, court reporters, docket clerks, and assistants provide the services to the parties of the case who appear at the scheduled docket settings in each respective office. The Division offers various docket settings to assist with the timely resolution of workers' compensation claims. The Division also schedules evidentiary hearings on medical fee disputes and tort victims' compensation cases.

LEGAL

Nasreen Esmail, Chief Legal Counsel

The Legal Unit provides legal advice and assistance to the Division Director and various units and programs within the Division. The Legal Unit oversees the Religious Exception Program, Medical Fee Dispute Program, Line of Duty Compensation Fund, Proof of Coverage, and the Dispute Management Unit. The unit responds to subpoenas and requests for records, complaints referred by other agencies, constituent requests, and all email inquiries sent to the Division's website. In addition to various other duties, the unit also drafts proposed rules and amendments to the existing regulations to be filed with the Joint Committee on Administrative Rules and Secretary of State's office upon approval by the Department and the Labor and Industrial Relations Commission.

DISPUTE MANAGEMENT

Glenn Easley, Mediator

The Dispute Management Unit is responsible for providing information and attempting to resolve disputes between employers/ insurers/Third-Party Administrators and injured employees prior to a Claim for Compensation being filed with the Division. The Division's information specialists receive calls, on the toll-free number maintained by the Division, from various stakeholders with questions about workers' compensation law, procedural requirements or status of a particular case. Referrals are made to this unit when it appears that the issues can be resolved at the early stages of a case by providing early intervention assistance. Written requests for mediation from injured workers are also received by the Mediator to determine if any disputes can be resolved by telephone conferences, rather than a personal appearance at one of the adjudication offices.

FRAUD & NONCOMPLIANCE

Byron Klemme, Investigation Manager

The Fraud and Noncompliance (F & N) Unit is responsible for investigating alleged fraud and noncompliance in workers' compensation. This unit investigates allegations of fraud by employees, employers, attorneys, insurers or physicians. Noncompliance includes the failure by employers to carry workers' compensation insurance, or to post notice of workers' compensation at the workplace. Appropriate cases of fraud and noncompliance are referred to the Missouri Attorney General's Office for prosecution.

SECOND INJURY FUND

Cindy Struemph, Manager

The Second Injury Fund Unit is responsible for the billing and collection of the Second Injury Fund (SIF) surcharge and supplemental surcharge as well as processing SIF benefit payments. When an employee is eligible for SIF benefits and a compromise settlement has been approved or an award has been issued by the Administrative Law Judge, the Division processes payments to the injured worker. The SIF Unit also pursues recoveries of overpayments made on permanent total disability cases and certifies vocational rehabilitation providers.

INSURANCE

Richard Cole, Manager

The Insurance Unit oversees roughly 30 percent of the workers' compensation insurance market as many employers take advantage of the option to self-insure their obligations. Missouri has stringent requirements that need to be met prior to granting self-insurance authority to an employer, including requirements that relate to financial stability, loss history, safety, and claims handling processes. The unit's functions consist of reviewing applications, overseeing the existing self-insured entities, and conducting claims audits.

WORKERS' SAFETY PROGRAM

Nicole Thompson, Manager

The Missouri Workers' Safety Program (MWSP) helps employers improve workplace safety and reduce workers' compensation costs by ensuring that Missouri businesses have access to individualized safety and health services by certifying the safety programs of insurance carriers and maintaining a registry of certified safety consultants. MWSP also certifies the safety programs of physical rehabilitation facilities and evaluates the safety programs of self-insured businesses and trusts.



Assessments & Expenditures

Workers' Compensation Administrative Fund Tax and Surcharge

As required by §287.690 and §287.716 the State of Missouri imposes a workers' compensation administrative tax on all workers' compensation insurance carriers and self-insured employers and an administrative surcharge on every workers' compensation deductible plan policyholder insured in Missouri, Section 287.690 authorizes the imposition of an administrative tax not to exceed two percent and §287.716 authorizes the imposition of an administrative surcharge at the same rate as the administrative tax. The revenue from the administrative tax and administrative surcharge is used to fund expenses associated with the administration of Missouri's Workers' Compensation Law. The Director of the Division determines the rates for the subsequent calendar year by October 31, using the formula set forth in §287.690.

Year	Premium Base	WC Assessment Rate	Revenue Collected
2007	\$1,935,620,269	1.00%	\$11,836,057
2008	\$1,694,928,423	1.00%	\$15,066,584
2009	\$1,514,085,982	0.50%	\$8,694,109
2010	\$1,323,493,497	1.00%	\$12,296,302
2011	\$1,351,278,216	1.00%	\$12,064,890
2012	\$1,431,904,829	1.00%	\$13,516,121
2013	\$1,513,481,654	1.00%	\$14,826,739
2014	\$1,675,711,819	1.00%	\$16,146,088
2015	\$1,669,420,832	1.00%	\$17,876,127
2016	Not yet available	1.00%	\$17,008,899

Source: Missouri Department of Insurance, Financial Institutions and Professional Registration and Missouri SAM II Financial System.

5,650,865*
17,008,899
77,926
1,767,380
18,854,205
\$16,185,917
16,185,917
8,319,153*

^{*}CASH BALANCE does not include approximately \$2,046,554 in administrative surcharge credits.

Source: Missouri SAM II Financial System

Second Injury Fund Surcharge

Section 287.715 provides for the collection of an annual surcharge not to exceed 3 percent from every authorized selfinsurer and every workers' compensation policyholder insured in Missouri. To address the solvency issues facing the SIF, §287.715.6 authorizes the Division Director to collect a supplemental SIF surcharge not to exceed 3 percent for calendar years 2014 to 2021, of policyholder's or selfinsured's workers' compensation net deposits, net premiums or net assessments of the previous policy year. The surcharge collected is deposited to the credit of the SIF and used to pay benefit and expense liabilities of the SIF per the prioritization schedule established pursuant to §287.220(15). Like the workers' compensation administrative tax and surcharge, the surcharge rate is calculated by October 31 for the subsequent year by the Director of the Division using the formula set forth in §287.715.2. The Division notifies the commercial

Year	Premium Base	SIF Assessment Rate	Revenue Collected
2007	\$1,935,620,269	3.00%	\$68,264,360
2008	\$1,694,928,423	3.00%	\$54,769,650
2009	\$1,514,085,982	3.00%	\$53,324,593
2010	\$1,323,493,497	3.00%	\$40,862,081
2011	\$1,351,278,216	3.00%	\$40,938,834
2012	\$1,431,904,829	3.00%	\$42,574,366
2013	\$1,513,481,654	3.00%	\$44,111,298
2014	\$1,675,711,819	3.0% Surcharge & 3.0% Supplemental Surcharge	\$80,312,196
2015	\$1,669,420,832	3.0% Surcharge & 3.0% Supplemental Surcharge	\$102,518,495
2016	Not yet available	3.0% Surcharge & 3.0% Supplemental Surcharge	\$102,180,003

Source: Missouri Department of Insurance, Financial Institutions and Professional Registration and Missouri SAM II Financial System.

BALANCE of fund on January 1, 2016	\$5,854,578*
Revenue:	
Surcharge Collections	102,180,003
Interest	48,706
Miscellaneous Receipts	110,644
Total Revenue	\$102,339,353
Expenditures:	
Benefit Disbursements	98,315,889
Administrative Costs	4,520,274
Total Expenditures	\$102,836,163
BALANCE of fund on December 31, 2016	\$5.357.768 *

^{*}does not include approximately \$32,782,104 in awards/settlements that have been issued that are currently being held for payment due to the financial condition of the fund.

Source: Missouri SAM II Financial System

carriers and self-insurers of the surcharge and supplemental surcharge percentages that have been imposed.

2016 Annual Report

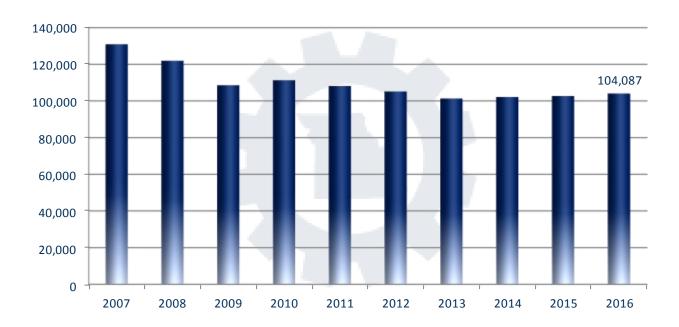
Workers' Compensation

First Reports of Injury (FROIs)

Every injury and occupational disease occurring in Missouri, except "first aid" cases not requiring medical treatment or lost time from work must be reported to the Division. The injury must be reported by the employer or his insurer within 30 days after having knowledge of the injury. The employer must report all injuries to its insurance carrier or third party administrator within five days of the date of the injury or within five days of the date on which the injury was reported to the employer by the employee, whichever is later. Since July 1995, the Division has received FROIs by electronic data interchange (EDI). This process minimizes errors, ensures timeliness in reporting, and reduces costs for the reporting entities and the Division. In 2016, 98 percent of FROIs were filed electronically (through EDI or the web). The increase in EDI filings has also significantly reduced the average time to process FROIs. In 2000, the average time to process FROIs was 14.5 days and by 2016, the average time to process decreased to 1.31 days.

Total FROI filings have generally decreased an average of just over 2 percent per year from 2007 to 2016, though there have been slight increases each year recently. There was a 1.3 percent increase in FROI filings from 2015 to 2016.

First Reports of Injury Filed 2007 - 2016



First Reports of Injury (FROIs) by County - 2016

County	FROIs	County	<u>FROIs</u>	County	<u>FROIs</u>
Adair	348	Grundy	131	Perry	474
Andrew	71	Harrison	111	Pettis	883
Atchison	70	Henry	351	Phelps	675
Audrain	471	Hickory	42	Pike	335
Barry	979	Holt	44	Platte	2,020
Barton	156	Howard	97	Polk	289
Bates	111	Howell	641	Pulaski	567
Benton	114	Iron	141	Putnam	51
Bollinger	50	Jackson	14,174	Ralls	28
Boone	3,537	Jasper	2,797	Randolph	485
Buchanan	2,115	Jefferson	1,668	Ray	193
Butler	687	Johnson	681	Reynolds	89
Caldwell	82	Knox	50	Ripley	83
Callaway	995	Laclede	677	Saline	435
Camden	718	Lafayette	459	Schuyler	16
Cape Girardeau	1,267	Lawrence	382	Scotland	45
Carroll	61	Lewis	195	Scott	775
Carter	31	Lincoln	478	Shannon	45
Cass	1,352	Linn	190	Shelby	78
Cedar	147	Livingston	247	St. Charles	5,757
Chariton	56	Macon	182	St. Clair	47
Christian	685	Madison	127	St. Francois	1,053
Clark	59	Maries	60	St. Louis City	6,527
Clay	5,854	Marion	653	St. Louis County	19,758
Clinton	283	McDonald	362	Ste. Genevieve	265
Cole	1,648	Mercer	71	Stoddard	300
Cooper	221	Miller	365	Stone	173
Crawford	251	Mississippi	191	Sullivan	154
Dade	71	Moniteau	148	Taney	1,275
Dallas	84	Monroe	109	Texas	250
Daviess	42	Montgomery	126	Vernon	264
DeKalb	49	Morgan	155	Warren	313
Dent	198	New Madrid	398	Washington	219
Douglas	65	Newton	400	Wayne	78
Dunklin	296	Nodaway	306	Webster	288
Franklin	1703	Oregon	57	Worth	6
Gasconade	187	Osage	197	Wright	156
Gentry	71	Ozark	46	OUT OF STATE	556
Greene	6,182	Pemiscot	183	Missing	23



FROIs by Industry - 2016

Industry	FROIs	<u>Percent</u>
Healthcare and Social Assistance	19,930	19.15
Manufacturing	14,624	14.05
Retail Trade	11,682	11.22
Public Administration	9,376	9.01
Educational Services	8,289	7.96
Accommodation and Food Services	6,429	6.18
Wholesale Trade	5,615	5.40
Construction	5,529	5.31
Transportation and Warehousing	5,095	4.90
Administrative and Waste Services	4,131	3.97
Professional, Scientific, and Technical Service	3,030	2.91
Other Services (Except Public Administration)	2,170	2.08
Arts, Entertainment, and Recreation	1,896	1.82
Utilities	1,466	1.41
Finance and Insurance	1,429	1.37
Real Estate and Rental and Leasing	1,147	1.10
Information	1,082	1.04
Agriculture, Forestry, Fishing and Hunting	784	.75
Management of Companies and Enterprises	148	.14
Mining	134	.13
Missing	101	.10
Total	104,087	100

FROIs by Body Part

Body Part	FROIs	Percent
HEAD	11,128	10.7
Eyes	3,608	3.5
Soft Tissue	2,485	2.4
Mouth/Nose/Teeth	1,119	1.1
Face/Skull	1,015	1.0
Facial Bones	366	0.3
Ears	398	0.4
Brain	253	0.2
Multiple Head Injury	1,884	1.8
NECK	1,696	1.6
Soft Tissue	960	0.9
Vertebrae/Disc	152	0.2
Larynx/Trachea	28	0.0
Spinal Cord	24	0.0
Multiple Neck Injury	532	0.5
UPPER EXTREMITIES	39,051	37.5
Fingers/Thumbs	13,754	13.2
Wrists/Hands	11,185	10.8
Upper Arms/Shoulders	7,361	7.1
Elbows/Lower Arms	5,773	5.5
Multiple Upper Extremities	978	0.9
TRUNK	14,872	14.3
Back	10,021	9.6
Abdomen/Groin/Buttocks	1,745	1.7
Chest	1,506	1.4
Lungs/Internal Organs	915	0.9
Pelvis/Sacrum & Coccyx	189	0.2
Spinal Cord/Disc	94	0.1
Heart	64	0.1
Multiple Trunk	338	0.3
LOWER EXTREMITIES	19,492	18.8
Knees/Lower Legs	9,303	9.0
Ankles/Foot/Feet	7,010	6.7
Hips/Upper Legs	1,586	1.5
Toes/Great Toes	932	0.9
Multiple Lower Extremities	661	0.7
BODY SYSTEMS	1,232	1.2
MULTIPLE BODY PARTS	14,269	13.7
WHOLE BODY	135	0.1
NO PHYSICAL INJURY	1,473	1.4
OTHER OR UNSPECIFIED	739	0.7
Total	104,087	100

FROIs by Age and Gender

As in previous years, approximately 54 percent of injuries reported to the Division in 2016 were for males. 20-29 year old males maintained the status of being the demographic with the most reported injuries during the calendar year.

,			_
<u>Gender</u>	Age Group	FROIs	Percent
Male	Unknown	595	0.6
Male	10-15	24	0.0
Male	16-19	1,703	1.6
Male	20-29	12,798	12.3
Male	30-39	12,558	12.1
Male	40-49	11,251	10.8
Male	50-59	11,682	11.2
Male	60-69	5,145	5.0
Male	70-79	662	0.6
Male	80-89	83	0.1
Famala	Unknown	470	0.5
Female Female	Unknown 10-15	478 16	0.0
Female	16-19	1,470	1.4
Female	20-29	10,545	10.1
Female	30-39	9,286	9.0
Female	40-49	9,191	8.8
Female	50-59	10,510	10.1
Female	60-69	4,918	4.7
Female	70-79	603	0.6
Female	80-89	69	0.1
Unknown	Unknown	7	0.0
Unknown	10-15	0	0.0
Unknown	16-19	26	0.0
Unknown	20-29	143	0.1
Unknown	30-39	107	0.1
Unknown	40-49	93	0.1
Unknown	50-59	83	0.1
Unknown	60-69	32	0.0
Unknown	70-79	8	0.0
Unknown	80-89	1	0.0
Total		104,087	100

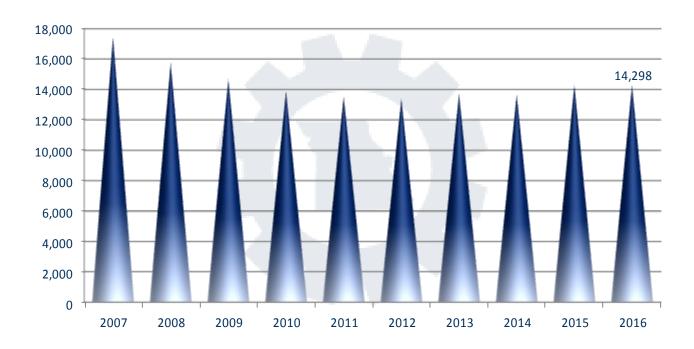
2016 Annual Report

Claims for Compensation

An employee may file a Claim for Compensation with the Division if they believe they are not receiving benefits they are entitled to under the Missouri Workers' Compensation Law. An employee may obtain legal representation to file a Claim for Compensation with the Division. The filing of a Claim initiates a contested case proceeding where the Administrative Law Judge (ALJ) has the authority to determine the issues in dispute.

In 2016, the Division received 14,298 claims for compensation filed against employers and insurers. This is a .2 percent decrease from the number of claims filed in 2015.

Claims for Compensation Filed 2007 - 2016



Claims by Industry

Claims by Body Part

Industry	<u>Claims</u>	Percent
Manufacturing	2,509	17.6
Public Administration	1,576	11.0
Health Care and Social Assistance	1,544	10.8
Transportation and Warehousing	1,239	8.7
Retail Trade	1,148	8.1
Construction	1,060	7.4
Wholesale Trade	823	5.8
Administrative and Waste Services	689	4.8
Educational Services	621	4.3
Accommodation and Food Services	582	4.1
Professional, Scientific, and Technical Services	358	2.5
Other Services (Except Public Administration)	260	1.8
Utilities	191	1.3
Real Estate and Rental and Leasing	178	1.2
Arts, Entertainment and Recreation	160	1.1
Information	156	1.1
Finance and Insurance	152	1.1
Agriculture, Forestry, Fishing and Hunting	103	0.7
Mining	20	0.1
Management of Companies and Enterprises	17	0.1
Missing	912	6.4
Total	14,298	100

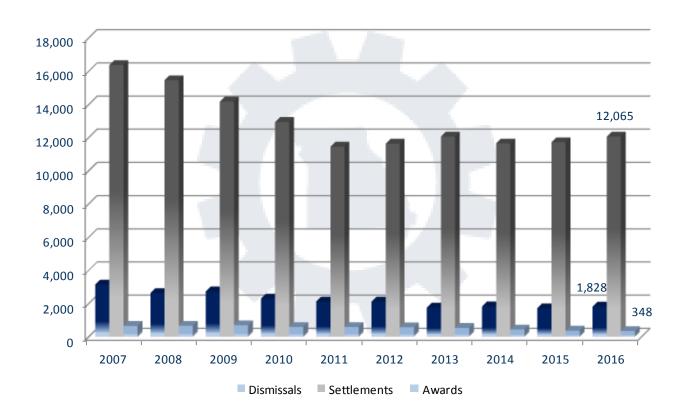
	Cidillis by Bo	Jay I are	
E	Body Part	<u>Claims</u>	<u>Percent</u>
ŀ	IEAD	42	0.3
	Eyes	8	0.0
	Brain	9	0.1
	Soft Tissue	5	0.0
	Ears	8	0.0
	Mouth/Nose/Teeth	2	0.0
	Multiple Head Injury	10	0.2
ľ	IECK	5	0.0
	Soft Tissue	4	0.0
	Multiple Neck Injury	1	0.0
Į	JPPER EXTREMITIES	210	1.5
	Upper Arms/Shoulders	88	0.6
	Wrists/Hands	51	0.4
	Fingers/Thumbs	23	0.2
	Elbows/Lower Arms	13	0.1
	Multiple Upper Extremities	35	0.2
1	RUNK	78	0.6
	Back	47	0.4
	Abdomen/Groin/Buttocks	18	0.2
	Lungs/Internal Organs	5	0.0
	Chest	5	0.0
	Heart	2	0.0
	Spinal Cord/Disc	1	0.0
L	OWER EXTREMITIES	131	0.9
	Knees/Lower Legs	68	0.5
	Ankles/Foot/Feet	38	0.3
	Hips/Upper Legs	8	0.0
	Multiple Lower Extremities	17	0.1
I	MULTIPLE BODY PARTS	13,761	96.2
V	VHOLE BODY	69	0.5
1	O PHYSICAL INJURY	1	0.0
(THER OR UNSPECIFIED	1	0.0
1	otal	14,298	100

2016 Annual Report

In 2016, 14,241 Claims for Compensation filed against employers and insurers were resolved by the Division's ALJs. Claims may be resolved through the issuance of an award, a compromise settlement, or a dismissal. As of December 31, 2016, nearly 26,000 Claims for Compensation were pending before the Division.

Case resolution time frames vary considerably for each resolution type, with cases proceeding to an evidentiary hearing before an ALJ and the issuance of an award taking longer to resolve than settlements and dismissals. This is probably due to trial preparation required to proceed to a hearing. For cases resolved with the issuance of an award in 2016, it took an average of 41 months from the date the claim was filed to reach a resolution. For settlements, the average time was 21 months and for dismissals, 29 months.

Claims for Compensation Resolutions 2007 - 2016

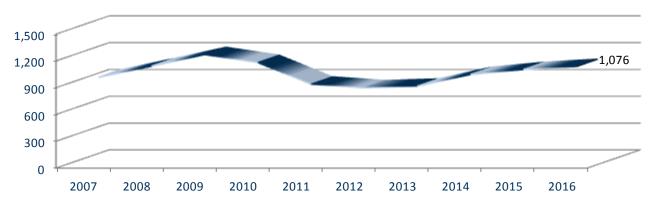


Occupational Diseases

§287.067.1. defines an occupational disease as an identifiable disease arising with or without human fault out of and in the course of employment. To be compensable under Chapter 287, the occupational exposure must be the prevailing factor in causing both the resulting medical condition and disability. SB 1, effective January 1, 2014, added occupational disease to the exclusive remedy provisions set forth in §§ 287.120.1 and 287.120.2. Please refer to the Introduction, pages 3 and 4 for an explanation of the changes made by SB 1 to occupational diseases.

In 2016, 1,076 claims were filed for occupational diseases which is a 3.3 percent increase from 2015.

Occupational Disease Claims 2007 - 2016



2016 Occupational Disease Cases Due to Toxic Exposure

Toxic OD	FROIs*	Claims**
Asbestosis	35	9
Berylliosis	3	4
Bronchiolitis Obliterans	0	2
Coal Worker's Pneumoconiosis	1	0
Mesothelioma	18	21
Myelodysplastic Syndrome	4	6
Silicosis	6	4
Silicotuberculosis	1	1
Total	68	47

^{*}Information reported to the Division on a FROI is confidential pursuant to §287.380

^{**}Claims filed may include injuries reported to the Division based on a FROI filing.

2016 Annual Report

Occupational Disease Claims by Injury

Occupational Disease	<u>Claims</u>	<u>Percent</u>
All Other Occupational Disease NOC	573	53.2
Carpal Tunnel Syndrome	217	20.2
Loss of Hearing	80	7.4
Mental Stress	72	6.7
Respiratory Disorders	43	4.0
Poisoning—Chemical	37	3.4
Asbestosis	17	1.6
Contagious Disease	7	0.7
Cancer	6	0.6
Dermatitis	6	0.6
Poisoning—Metal	5	0.5
Mental Disorder	4	0.4
Radiation	3	0.3
Dust Disease - NOC	2	0.2
Silicosis	2	0.2
Coal Worker's Pneumoconiosis	1	0.0
Hepatitis C	1	0.0
Total	1,076	100

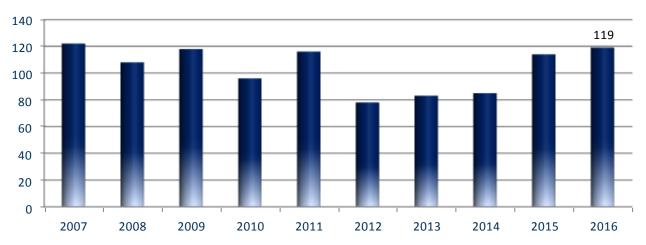
Occupational Disease Claims by Industry

Industry	<u>Claims</u>	<u>Percent</u>
Manufacturing	374	34.8
Public Administration	106	9.9
Health Care and Social Assistance	66	6.1
Retail Trade	54	5.0
Transportation and Warehousing	49	4.6
Wholesale Trade	47	4.4
Construction	45	4.2
Educational Services	37	3.4
Finance and Insurance	26	2.4
Utilities	26	2.4
Administrative and Waste Services	25	2.3
Accommodation and Food Services	22	2.0
Professional, Scientific and Technical Services	21	2.0
Information	15	1.4
Other Services (Except Public Administration)	11	1.0
Agriculture, Forestry, Fishing, and Hunting	9	0.8
Real Estate and Rental and Leasing	8	0.7
Arts, Entertainment, and Recreation	3	0.3
Management of Companies and Enterprises	2	0.2
Mining	2	0.2
Missing	128	11.9
Total	1,076	100

Fatalities

In 2016, 119 injuries that resulted in fatalities were reported to the Division. These may have been reported to the Division through either a FROI or through the filing of a Claim for Compensation. The injury may or may not be determined to be a compensable injury that caused the death of the injured worker.

Fatalities 2007 - 2016



Fatalities by Age & Gender

Age Group	<u>Male</u>	<u>Female</u>	<u>Total</u>
Missing	2	0	2
16-19	1	0	1
20-29	14	2	16
30-39	7	1	8
40-49	16	0	16
50-59	30	1	31
60-69	20	2	22
70-79	9	3	12
80-89	9	2	11
Total	108	11	119

Fatalities by Industry

Industry	Cases	<u>Percent</u>
Manufacturing	27	22.7
Construction	21	17.7
Transportation and Warehousing	20	16.8
Retail Trade	6	5.0
Public Administration	5	4.2
Health Care and Social Assistance	4	3.4
Administrative and Waste Services	3	2.5
Real Estate and Rental and Leas- ing	3	2.5
Wholesale Trade	3	2.5
Accommodation and Food Services	2	1.7
Agriculture, Forestry, Fishing, and Hunting	2	1.7
Mining	2	1.7
Utilities	2	1.7
Finance and Insurance	1	0.8
Other Services	1	0.8
Professional, Scientific and Technical Services	1	0.8
Missing	16	13.5
Total	119	100



Second Injury Fund

Second Injury Fund Claims

In 1943, the Missouri Workers' Compensation Law was amended to benefit the physically handicapped and individuals with a previous disability. The amendment helped employers by limiting liability to only the current injury that results in permanent total disability. The SIF encourages employment by permitting persons to be employed without exposing employers to any liability for previous disabilities.

When an employee sustains a compensable work injury prior to January 1, 2014, and the combined effect of the work-related injury and prior disability results in permanent total disability (PTD), or increased permanent partial disability (PPD), the employer at the time of the last injury, is liable only for compensation due from the most recent injury. The remaining compensation owed to the employee is paid from the SIF.

The following benefit types are available from the SIF for injuries occurring prior to January 1, 2014, PPD, PTD, Rehabilitation benefits, Second Job Wage Loss benefits, Medical and Death Benefit expenses for injured employees of uninsured employers.

SB 1 made several changes to the SIF. The changes are:

- (a) authorizes the Division to have an annual actuarial study done;
- (b) eliminates PPD claims against the SIF for injuries occurring after January 1, 2014 and provides for the PTD claims to be covered as long as the prior disability meets certain established conditions;
- (c) provides for PTD benefits against the SIF to employees employed in a sheltered workshop;
- (d) eliminates the uninsured medical and death benefits to be paid from the SIF and also the second job wage loss benefits for injuries occurring on or after January 1, 2014;
- (e) establishes a prioritization schedule for payment of SIF liabilities;
- (f) states that no compensation is payable from the SIF when an employee files a Claim for Compensation under the Workers' Compensation Law of another state for the injury or accident or occupational disease;
- (g) provides for the suspension of life payments to be made from the SIF when the employee is able to obtain suitable gainful employment or be self-employed.

Based upon a claim filed against the SIF, for an injury that occurs after January 1, 2014, or for a subsequent compensable injury which is an occupational disease filed after January 1, 2014, the determination of any PTD liability against the SIF will be based upon the conditions set forth in §287.220.3(2) being met. The liability of the SIF requires a determination of the date of the occurrence of a compensable injury.

The Missouri State Treasurer's Office is the custodian of the SIF. The Missouri Attorney General's Office defends the claims made against the SIF. The Division is responsible for the billing and collection of the SIF surcharge. The Division requisitions warrants from the State Treasurer's Office for payment to be made to the employee or dependents who have been awarded SIF benefits pursuant to an award issued by or settlement approved by an ALJ. In 2016, there were 2,469 claims filed against the SIF. This is a 20.9 percent decrease in claim filings from 2015. The Division has seen an overall decrease of 78.2 percent in SIF claim filings since 2007.

No claims for PPD occurring after January 1, 2014 shall be filed against the SIF. Claims for PTD filed against the SIF are regarded as compensable only when the conditions set forth in §287.220.3(2) are met.

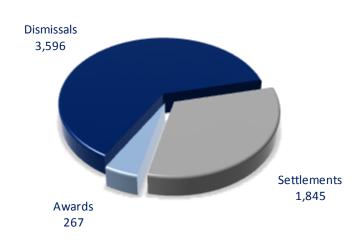
Second Injury Fund Claims 2007 - 2016





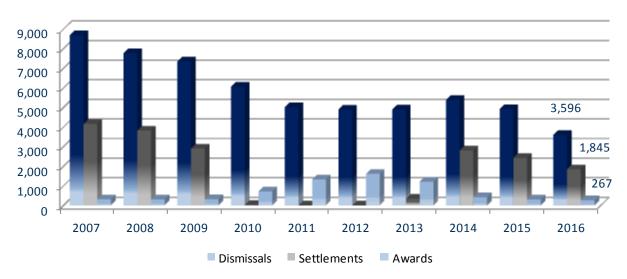
Second Injury Fund Claim Resolutions - 2016

In 2016, 5,708 Claims for Compensation filed against the SIF were resolved by dismissal, settlement, or issuance of an award. Approximately 4.7 percent of the resolutions were the result of hearings before ALJs, resulting in the issuance of awards. All awards issued by ALJs after a hearing may not necessarily result in SIF benefits being awarded to claimants. An ALJ may also determine the SIF owes no compensation benefits. As of January 1, 2017, there were 20,865 open SIF claims pending before the Division.



Second Injury Fund Claim Resolutions 2007 - 2016

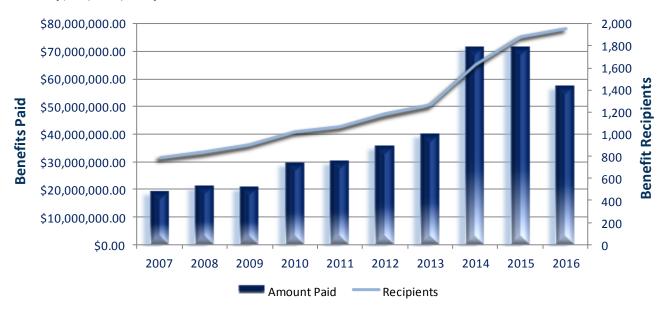
Approximately 65.2 percent of all SIF claims were resolved each calendar year prior to 2009 based upon a dismissal, 32.5 percent were resolved through a settlement reached by the parties and approved by an ALJ, and the remaining 2.3 percent proceeded to an evidentiary hearing before an ALJ resulting in the issuance of an award. In 2016 63 percent were through dismissals, 32.32 percent through settlements and 4.68 percent by issuance of an award.



Second Injury Fund Benefit Payments

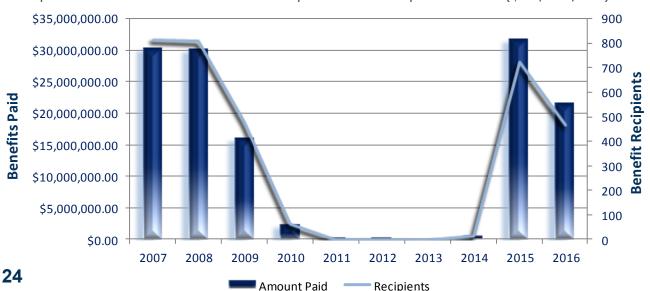
Permanent Total Disability Benefits (Lifetime Payments)

In 2016, \$57,020,105 in permanent total (PTD) benefits (lifetime benefits) were paid to 1,961 recipients. This is a 19.8 percent decrease from the PTD lifetime benefits paid in 2015 (\$71,110,291).



Permanent Total Disability Benefits (Lump Sum Payments)

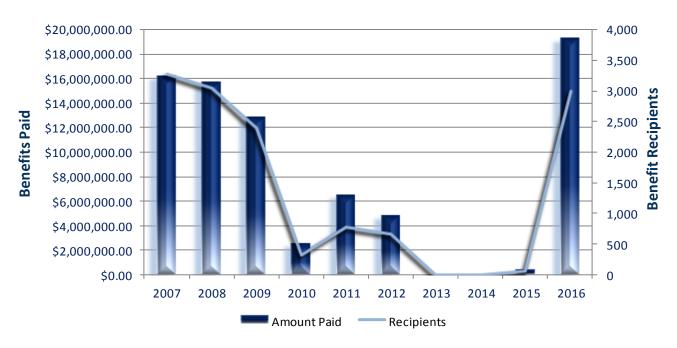
In 2016, \$21,468,598 in PTD lump sum benefits were paid to 465 recipients. This is a 29.9 percent decrease from the PTD lump sum benefits paid in 2015 (\$30,624,870).





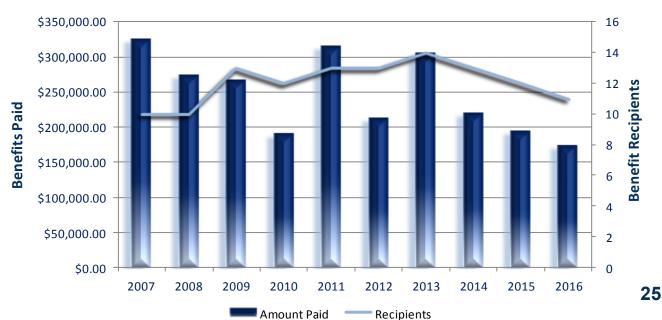
Permanent Partial Disability Benefits

In 2016, \$19,295,829 in permanent partial (PPD) benefits were paid to 2,998 recipients.



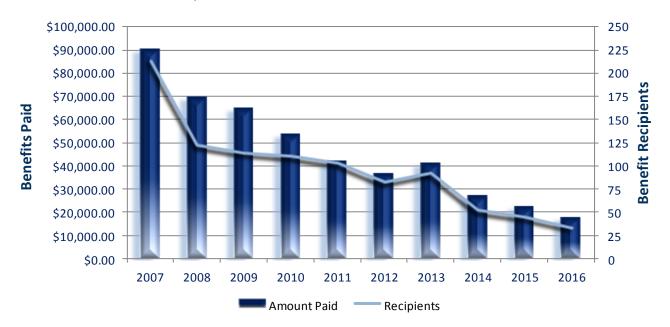
Death Benefits

The survivors of 11 injured employees received bi-weekly death benefits totaling \$168,560 from the SIF in 2016 due to a work-related death of an employee while working for an uninsured employer. The recipients received the benefits prior to the start of calendar year 2016.



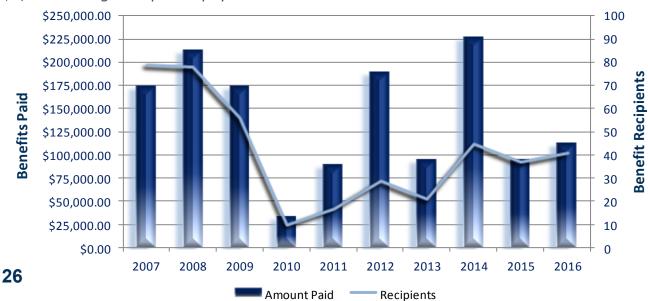
Rehabilitation Benefits

The SIF paid approximately \$17,531 to injured employees for rehabilitation benefits in 2016. This amount covered weekly benefits for 34 injured workers. Rehabilitation benefits were down 21.1 percent from 2015.



Second Job Wage Loss Benefits

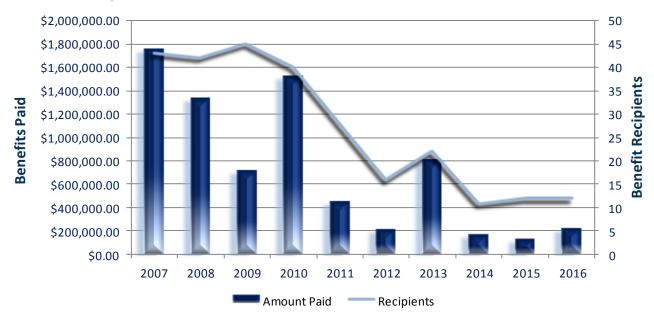
41 injured employees received second job wage loss benefits from the SIF in 2016. The amount paid in 2016 was \$112,106, which was a 19.9 percent increase from 2015. The average lump sum payment in 2016 was \$2,734 a 5.3 percent increase from the \$2,597 average lump sum payment in 2015.



2016 Annual Report

Medical Benefits

Medical benefits paid from the SIF in 2016 totaled \$217,996. Twelve recipients received benefits, one more than in 2015.



Second Injury Fund Recovery Payments

Pursuant to §287.150, the SIF shall be subrogated to the rights of any recoveries received by an employee from a third party in any case in which the SIF paid benefits to the injured employee. In 2016, there was one case in which the SIF recovered a total amount of \$1,657.36 as subrogation reimbursement.

Section 287.220 provides for the recovery of monies paid from the SIF for medical or death expenses when the employer fails to carry the required workers' compensation insurance coverage. In 2016, \$22,054.98 was collected from 12 employers.

In addition, an amount of \$59,705.89 was collected from employees and/or dependents and their attorneys respectively, who were paid Permanent Total Disability benefits pursuant to an award. This amount represents overpayments that were recovered either by the Division or by the Missouri Attorney General's Office after an employee's death.

Fraud & Noncompliance

The Fraud and Noncompliance Unit investigates allegations of workers' compensation fraud and noncompliance perpetrated by a person or entity. Section 287.128 prohibits certain conduct in connection with the workers' compensation process. Such prohibited conduct includes, but is not limited to:

- failure of an employer to insure its workers' compensation liability;
- knowingly filing multiple claims for the same occurrence with intent to defraud;
- knowingly making a false claim for the payment of health care benefits; and
- knowingly making a false or fraudulent material statement for obtaining or denying a benefit.

At the conclusion of the investigation by the Fraud and Noncompliance Unit, the findings are presented to the Division Director who may refer the file to the Missouri Attorney General's Office for possible prosecution.

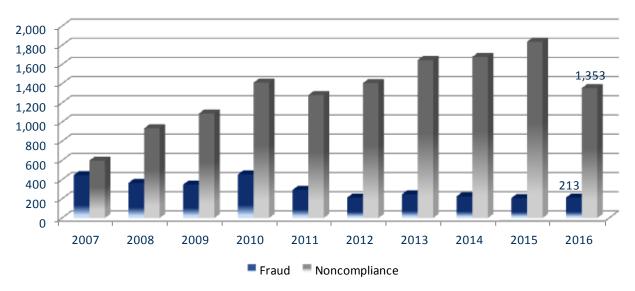
The records, reports, recordings, photographs, and documentation submitted by any person to the unit are confidential and not subject to Missouri's open records laws, although an exception exists to allow the release of records to a local, state, or federal law enforcement authority.

Effective January 1, 2017, any person who knowingly files a false or fraudulent workers' compensation claim for payment of benefits; any insurance company or self-insurer who knowingly and intentionally refuses to comply with known and legally indisputable obligations with intent to defraud; or any person who prepares or provides am invalid certificate of insurance as proof of coverage, shall be guilty of a class E felony and shall be fined up to \$10,000 or double the value of the fraud, whichever is greater. Any person who has been previously found guilty shall be guilty of a class D felony. A person who commits any other violation included in §287.128 shall be guilty of a class A misdemeanor and shall be fined up to \$10,000. Any employer failing to insure its liability shall be guilty of a class A misdemeanor and shall be fined up to three times the annual premium the employer would have paid had such employer been insured or up to \$50,000, whichever is greater. A subsequent instance of noncompliance shall be a class E felony.



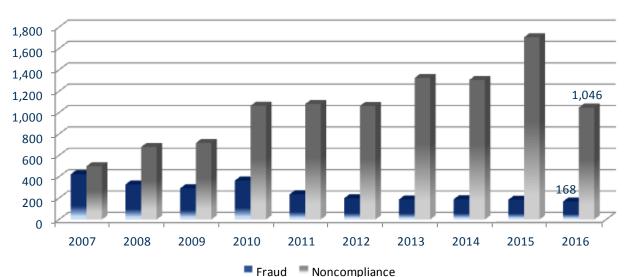
Fraud & Noncompliance Cases Received 2007 - 2016

In 2016, the Fraud and Noncompliance Unit received a total of 1,566 new cases of alleged workers' compensation fraud or noncompliance. This is a 23 percent decrease over the number of cases received in 2015. 2016 had the first decrease in the number of new cases since 2011.



Fraud & Noncompliance Cases Administratively Closed 2007- 2016

After an investigation, a case can be administratively closed due to complaints that contain inaccurate statements or lack of evidence. In 2016, 1,214 cases were administratively closed. This is a 35.8 percent decrease from the number of cases administratively closed in 2015.



<u>Fraud & Noncompliance Cases Referred to the Attorney General's Office</u> 2007 - 2016

Since 2007 approximately 25 percent of cases closed annually are referred to the Missouri Attorney General's Office (AGO) for prosecution. In 2016, 329 cases were referred to the AGO, a 12 percent increase from 2015.



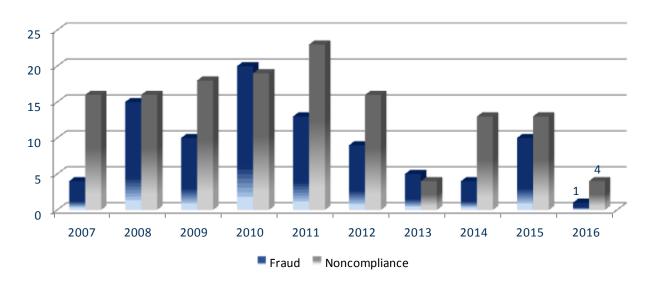
Fraud & Noncompliance Referrals to AGO by Party or Industry

	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	Total
Fraud											
Attorney	2	0	0	0	0	0	1	0	0	0	3
Employee	24	18	16	13	12	10	22	15	8	5	143
Employer	37	36	24	48	50	23	34	18	19	22	311
Insurance Carrier/ Agent	0	2	1	50	2	1	0	0	0	0	56
Other	1	0	0	0	0	0	0	1	0	1	3
Noncompliance											
Construction	45	74	38	56	37	59	51	52	60	63	535
Government	0	1	1	0	1	1	3	0	1	1	9
Healthcare	7	4	17	6	25	31	37	33	17	25	202
Manufacturing	1	3	6	17	14	9	7	5	6	2	70
Retail	63	116	133	141	183	251	237	202	165	194	1,685
Trucking/ Transportation	7	6	7	14	22	13	11	8	12	13	113
Other	13	14	18	1	5	6	1	6	6	3	73
Total	200	274	261	346	351	404	404	340	294	329	3,203



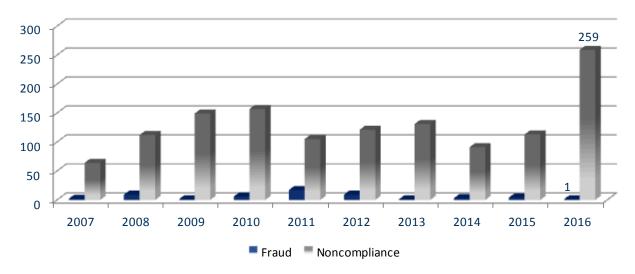
Successful Fraud & Noncompliance Prosecutions 2007- 2016

In 2016, the Attorney General's Office successfully prosecuted one fraud and four noncompliance cases.



Deferred Prosecution & Hold Harmless Agreements 2007 - 2016

In lieu of prosecution, the Attorney General's Office will enter into deferred prosecution agreements and/or hold harmless agreements with businesses or individuals accused of workers' compensation fraud or noncompliance. In 2016, there were 260 resolutions, resulting in a 122 percent increase in these types of resolutions compared to 2015.



^{*}Note: Numbers for 2016 have not been finalized with AGO's office as of the writing of this report. Actual counts may be higher.

Penalties Received*

Since 2003, the Division has collected over \$8.6 million in penalties from prosecuted employees, employers, and insurance companies.

<u>Year</u>	<u>Fraud</u>	Noncompliance	<u>Total</u>
2003	\$0.00	\$418,521.10	\$418,521.10
2004	\$4,100.00	\$574,059.47	\$578,159.47
2005	\$2,200.00	\$821,419.77	\$823,619.77
2006	\$1,827.98	\$632,740.39	\$634,568.37
2007	\$4,237.58	\$299,948.45	\$304,186.03
2008	\$4,483.50	\$413,853.85	\$418,337.35
2009	\$3,392.00	\$605,412.28	\$608,804.28
2010	\$7,936.38	\$574,741.19	\$582,677.57
2011	\$123,397.78	\$469,849.83	\$593,247.61
2012	\$13,905.49	\$452,696.44	\$466,601.93
2013	\$13,518.00	\$568,949.98	\$582,467.98
2014	\$3,870.00	\$427,249.05	\$431,119.05
2015	\$11,110.50	\$745,632.06	\$756,742.56
2016	\$7,835.00	\$1,413,246.44	\$1,421,081.44

st Penalties received include those imposed in previous years. Many penalties are paid in monthly installments over several years.



Insurance

Section 287.280 requires an employer, who is subject to chapter 287, RSMo to insure their entire liability under the workers' compensation law, on either an individual or group basis, by either purchasing insurance coverage through a carrier authorized by the Department of Insurance, Financial Institutions and Professional Registration or by meeting the Division's requirements to self-insure. An employer may insure in whole or in part their employer liability under a policy of insurance or a self-insurance plan. Upon receiving approval from the Division to self-insure, an employer becomes financially responsible for all workers' compensation liabilities incurred. Under the statute, employers can self-insure individually or as a group. The Division granted individual employers authority to self-insure their workers' compensation liabilities beginning in 1936. The Division approved self-insurance authority to groups in 1982.

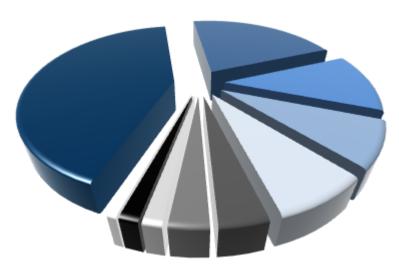
	2013	2014	2015	<u>2016</u>
Individual Self-Insurers	288	289	284	282
Group Trusts	21	20	20	20
Individual Member Employers in Group Trusts	2,555	2,674	2,696	2,721
Covered SI Employees*	652,929	665,104	690,759	679,724
Covered SI Payroll*	\$25,301,065,506	\$25,908,930,219	\$27,079,441,496	\$28,062,950,638
SI Payroll as Percent of All Covered Payroll	24.06%	23.68%	Data available August 2017	Data not yet available

Source: Missouri Division of Workers' Compensation. National Academy of Social Insurance, Workers' Compensation: Benefits, Coverage, and Costs, October 2016. * Numbers provided are based on counts as of January 1 of the indicated year.

The Division's Insurance Unit is responsible for authorizing and regulating all self-insured employers in Missouri. The unit must ensure that all self-insured employers comply with chapter 287, RSMo, and follow the regulation 8 CSR 50-3.010. The unit's primary functions consist of approving applications to self-insure submitted by employers, providing oversight and assistance to current self-insured entities, ensuring that annual reports are timely submitted to the Division, evaluating security posted, conducting audits to examine case management practices for compliance with statutory requirements and the Division's established guidelines and safety audits.

2016 Individual Self-Insured Employers by Industry

Industry	<u>Companies</u>	<u>Percent</u>
Services	119	42.2
Manufacturing	60	21.3
Retail Trade	32	11.4
Transportation & Public Utilities	22	7.8
Public Administration	21	7.5
Wholesale Trade	10	3.5
Finance, Insurance and Real Estate	8	2.8
Construction	4	1.4
Agriculture, Forestry, Fishing & Hunting	4	1.4
Mining	2	0.7
Total	282	100



- Services
- Manufacturing
- Retail Trade
- Transportation & Public Utilities
- Public Administration
- Wholesale Trade
- Finance, Insurance and Real Estate
- Construction
- Agriculture, Forestry, Fishing & Hunting
- Mining

2016 Annual Report

Legal Unit

The Legal Unit provides legal advice and assistance to the Division Director and the various units and programs within the Division. The legal unit also oversees the Religious Exception Program, Medical Fee Dispute Program, Dispute Management Unit, Line of Duty Compensation Fund, and Proof of Coverage. In addition to other general duties, the unit also drafts proposed rules and amendments to the existing regulations.

The Religious Exception Program receives, reviews, and responds to all questions related to granting workers' compensation exceptions to employers and employees who are members of a recognized religious sect or division (as defined by federal law) who are conscientiously opposed to acceptance of benefits of any public or private insurance in various contexts. In 2016, the unit received 61 applications for religious exception in which 61 employees working for 14 different employers qualified for a religious exception.

The Medical Fee Dispute Program allows health care providers to file an application for reimbursement of disputed and outstanding charges and fees relating to treatment and services provided to injured employees. In 2016, the unit processed 212 applications for direct payment and 2,157 applications for payment of additional reimbursement. Since September 1, 2006, the Division has administratively reviewed "reasonableness" disputes where the amount in dispute was \$1,000 or less. The Medical Fee Dispute Program received 313 applications for "reasonableness" disputes under \$1,000 in 2016. Requests for an Administrative Ruling were submitted in 44 cases. The Division's Mediator received records and corresponded with the parties in 31 Medical Fee Dispute cases that resulted in these cases being resolved without the need for issuing a formal Administrative Ruling. Administrative Rulings were issued in 21 cases.

Reasonableness Medical Fee Disputes Filed 2010-2016 (Less than \$1,000)



SB 1 inserted a statute of limitations period in §287.140.4 for filing an application for payment of additional reimbursement of medical fees pursuant to 8 CSR 50-2.030. It is: Two years from the date of the first notice of dispute of medical charge was received by the health care provider if the services were provided before July 1, 2014; and one year from the date the first notice of dispute of medical charge was received by the health care provider if the services were provided after July 1, 2014. Notice is presumed to occur no later than 5 business days after transmission by certified US mail.

The Unit received approximately 570 requests for assistance through the Division's website from various stakeholders and customers. The Unit takes pride in educating, calling and responding to all written and verbal requests for information relating to the law and general inquiries that are received. The Unit responded to approximately 60 constituent requests and 48 requests for Proof of Workers' Compensation Insurance Coverage.



Line of Duty Compensation Fund

The Line of Duty Compensation Fund provides benefits for firefighters, volunteer firefighters, law enforcement officers, air ambulance pilots, air ambulance registered professional nurses, and emergency medical technicians who are killed in the line of duty.

In 2014, the 97th Gen. Assembly 2d Reg. Sess. (2014) made changes to §287.243.2 (5) by revising the term "Killed in the line of duty." This is a major substantive change made by SB 852. "Killed in the line of duty", is defined to mean the loss of a person's life when:

- (a) Death is caused by an accident or the willful act of violence of another;
- (b) The law enforcement officer, emergency medical technician, air ambulance pi lot, air ambulance registered professional nurse, or firefighter is in the active performance of his or her duties in his or her respective profession and there is a relationship between the accident or commission of the act of violence and the performance of the duty, even if the individual is off duty; the law enforcement officer, emergency medical technician, air ambulance pilot, air ambulance registered professional nurse, or firefighter is traveling to or from employment; or the law enforcement officer, emergency medical technician, air ambulance pilot, air ambulance registered professional nurse, or firefighter is taking any meal break or other break which takes place while that individual is on duty;
- (c) Death is the natural and probable consequence of the injury; and
- (d) Death occurs within three hundred weeks from the date the injury was received.

The term excludes death that results from the willful misconduct or intoxication.

In order to receive benefits, the death must have occurred on or after June 19, 2009. The estate of the deceased must file a Claim for Compensation for Line of Duty Compensation Benefits with the Division within one year from the date of death. After a Claim is filed, the Division starts an investigation for substantiation of matters set forth in the Claim. The Division coordinates with the employer and reviews documents submitted by the employer and claimant. After completion of the investigation, the Division Director issues an Administrative Determination either granting or denying line of duty compensation benefits. Pursuant to §287.243.7 any person who is aggrieved by the decision issued by the Division on the Claim for Compensation for Line of Duty Compensation Benefits may apply for an evidentiary hearing before an Administrative Law Judge. If no request for an evidentiary hearing is made within 30-days of the date of the decision, the Administrative Determination becomes the final award in the case and no appeal may be made to the Division or Commission or to the courts.

If compensation is granted, a \$25,000 compensation benefit is paid to the claimant, subject to appropriation. The compensation is in addition to any other pension rights, death benefits, or other compensation that claimant may otherwise be entitled to by law. The employers and workers' compensation insurers do not have subrogation rights against any compensation that is awarded for claims filed against the Line of Duty Compensation Fund.

The State Treasurer is the custodian of the Line of Duty Compensation Fund and approves the disbursements from the fund.

To date, 48 Claims for Compensation for Line of Duty Compensation Benefits have been filed with the Division. The Division Director has issued an Administrative Determination Granting Line of Duty Compensation Benefits in 40 cases.



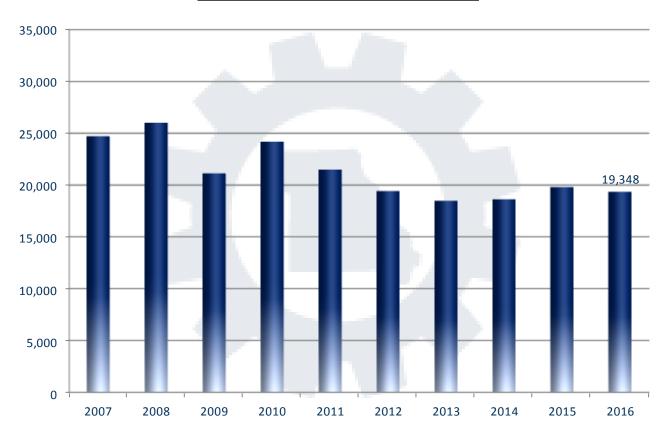
Customer Service

Division Toll-Free Line

The Division is required to maintain a public information program that provides assistance to all parties governed by the Missouri Workers' Compensation Law including injured employees, employers, insurers, and lawyers. The Division maintains a toll-free number for any person to call the Division with questions relating to the Workers' Compensation Law. The unit employs information specialists to respond to calls received on the toll-free line.

Calls on the toll-free line saw their first decrease since 2013. The Division's two information specialists handled a total of 19,348 calls in 2016, a 2.3 percent decline from the 19,797 calls handled in 2015.

Toll-Free Line Calls 2007- 2016



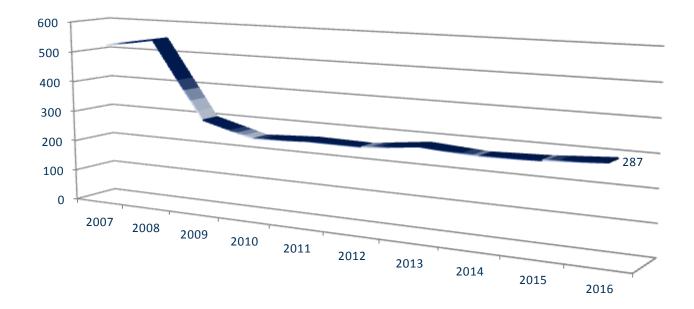
Dispute Management

The Dispute Management Program offers early intervention services and mediates disputes that arise between the parties soon after a workplace injury occurs. The Division has one mediator who assists parties in resolving medical treatment and lost wage disputes. This is a voluntary process. When one of the parties does not agree to mediate, the party originally requesting mediation services is advised that he or she may take further steps if the problem persists, including requesting a docket setting with an administrative law judge (ALJ). The Dispute Management Unit does not provide voluntary mediation services if a Claim for Compensation has been filed with the Division as the filing of a claim initiates a contested case proceeding.

Voluntary Mediation

Referrals for voluntary dispute management dropped significantly between 2006 and 2010, but have largely leveled off for the past six years, with only slight increases during the last three years. In 2016, there were 287 referrals for voluntary mediation, a 4.4 percent increase from 2015.

Referrals for Voluntary Dispute Management Assistance 2007 - 2016



2016 Annual Report

Cause of Referrals

Cases will be referred to the dispute management unit when it appears a mediator may be able to resolve the issue without a formal proceeding. The majority of the referrals were in the "other" category versus the common reasons of dispute referrals. This may include the employee requesting assistance on multiple issues.

Cause	Count	Percent
Other	90	19.5
PPD Issues	73	15.8
Unpaid Medical Bills	69	14.9
Eligibility for TTD	55	11.9
Employee Request for Medical Treatment	50	10.8
Need for Medical Treatment	42	9.1
Denial of Benefits	29	6.3
Employer Not Reporting Injury	26	5.6
Question Benefit Amounts	14	3.0
Wage at Injury	5	1.1
Mileage Reimbursement	5	1.1
Permanent Disability	3	0.7
Date of Injury	1	0.2
Total	462	100

Note: A case may have more than one cause for referral.

Source of Referrals

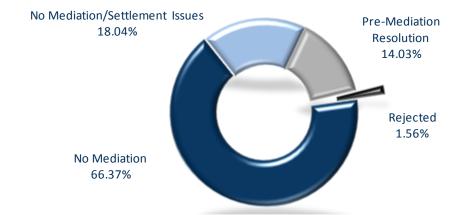
The most common source of dispute management referral in 2016 was by phone calls to the Division either through the Division's information hotline or by directly calling the mediator, accounting for 80.2 percent of all referrals.

Source of Referral	Count	Percent
Phone Call	138	48.1
DWC Information Specialist (800 Line)	92	32.1
Dispute Management Conference Request	31	10.8
Other	21	7.3
Notification of Rights Letter	5	1.7
Total	287*	100

*This number does not include referrals from previous years that had not been closed as of January 1, 2016

Voluntary Dispute Referral Outcomes

In 2016, the dispute management unit closed a total of 449 referred cases, which includes cases that were still being worked on from prior years.



Workers' Safety Program

All insurance carriers writing workers' compensation insurance in Missouri must provide comprehensive safety engineering and management services to employers. The Workers' Safety Program certifies and audits these services, investigates complaints of inadequate loss control services, monitors the impact of those services on Missouri employers, and offers additional safety assistance when needed. The Workers' Safety Program maintains a registry of certified safety consultants and engineers who can offer independent safety services to Missouri employers. The Program also answers questions about safety training and approves alternative courses for the Construction Safety Rule. The Program conducts site visits with self-insured businesses and trusts to ensure that they have acceptable safety programs that meet the requirements for self-insurance and certifies the safety programs of rehabilitation facilities who are participating in the SIF rehab benefit program.

In 2016, the Program conducted 52 site visits and certified 116 insurance carrier groups with comprehensive safety engineering and management programs, 251 safety consultants or engineers and 139 Physical Rehabilitation Facilities. The program also conducted 128 phone reviews with employers regarding the safety services the employer received from their insurance carrier.

Site Visits by Type

<u>Type</u>	<u>Visits</u>	<u>Percent</u>		
Insurance Carrier Evaluations	2	3.9		
Ergonomic	2	3.9		
Rehabilitation Facilities (for SIF Unit)	30	58.8		
Self-Insurance Audits (for Insurance Unit)	17	33.4		
Total	51	100		



Adjudication

The Division's statutory responsibility to adjudicate and resolve disputes under the law is fulfilled by the seven adjudication offices throughout the state of Missouri. The administrative law judges (ALJs), court reporters, docket clerks, and assistants provide the services to the parties to the case who appear at the scheduled docket settings in each respective office. The Division has streamlined the rendition of services by standardizing several forms that the parties utilize to request a docket setting. The Division offers various docket settings, such as voluntary settlement conference; prehearing; mediation; §287.203 hearing (to contest termination of compensation); hardship hearing; hearing upon final award; and notice to show cause or dismissal settings. The various docket settings are briefly summarized below. The Division also schedules evidentiary hearings on medical fee disputes and tort victims' compensation cases.

A case is set for a **voluntary settlement conference** with an ALJ after the employer/ insurer has filed a First Report of Injury (FROI) with the Division, or after the employee has initiated a case through the Dispute Management Unit. A voluntary settlement conference may be set by written request of a party by completing a Division-approved form, or it may be set at the discretion of the Division.

A **pre-hearing** is a proceeding before an ALJ to discuss issues in a case in which a claim for compensation has been filed. A pre-hearing may be requested when:

- The parties want to present a settlement agreement for approval;
- Disputes or other issues arise that must be resolved in order for the case to proceed;
- The parties have a good-faith belief that a brief meeting with an ALJ will help in moving the case more expeditiously to settlement or final hearing.

A **mediation** is a setting in which the parties and their attorneys, if they are represented, meet with an ALJ to discuss issues in a confidential manner, identify areas of agreement and facilitate a compromise settlement of a claim to avoid proceeding to a hearing. A mediation may be set upon the written request of a party, provided that an ALJ finds that the issues have been sufficiently developed to make the mediation meaningful. It is the intent of the Division to conduct a mediation before the parties incur the expense of any expert medical depositions.

A **hardship hearing** is an evidentiary hearing held before an ALJ when the employee alleges that he or she is not at maximum medical improvement, is in need of medical treatment, or entitled to temporary total disability (TTD) benefits, and the employer is not providing such treatment or benefits. The hearing may alternatively be based on the termination of benefits under §287.203. A hardship hearing is a hearing in which the employee is requesting the issuance of a temporary or partial award. A temporary or partial award addresses issues of medical treatment and payment of temporary disability benefits. If a party requests the issuance of a final award and makes it an issue at the hearing, and the evidence presented so merits, a final award may be issued.

A **hearing requesting issuance of a final award** is an evidentiary hearing held before an ALJ. Evidence is offered, testimony is presented, and a verbatim record is made for the reviewing tribunal. A final hearing may be requested when the employee has reached maximum medical improvement or the case is otherwise ready for final resolution.

All parties must appear at the hearing and be ready to proceed with the presentation of evidence on all issues. An ALJ may grant a continuance of the final hearing only upon a showing of good cause or by consent of the parties. A continuance will generally not be granted for conflicts after the attorney has cleared the hearing date in advance.

In cases where §287.203 applies, the ALJ shall issue an award, including findings of facts and rulings of law, within 90 days of the last day of the hearing. For all other hearings (except hearings on the medical fee disputes reasonableness cases) an ALJ shall issue the award within 90 days of the last day of the hearing. The hearing shall be concluded within 30 days of the commencement of the hearing, except in extraordinary circumstances.

If the ALJ determines that any proceedings have been brought, prosecuted, or defended without reasonable grounds, the ALJ may assess the whole cost of the proceedings upon the party who brought, prosecuted, or defended them. The ALJ shall not issue a written award if the case is settled or dismissed after a hearing and before the award is issued.

Compromise settlements between the parties must be approved by an ALJ in order to be valid. An ALJ will approve a settlement agreement pursuant to §287.390 as valid and enforceable as long as:

- The settlement is not the result of undue influence or fraud;
- The employee fully understands his or her rights and benefits;
- The employee voluntarily agrees to accept the terms of the agreement; and
- The settlement is in accordance with the rights of the parties.

All stipulations for compromise settlement submitted for approval must be accompanied by copies of all available medical rating reports, surgical notes, and radiological reports, or progress notes showing a diagnosis, or statement from the employer/insurer's attorney indicating that the injury is of such a minor nature that no medical report is necessary. Stipulations for compromise settlement in an acceptable format may be presented for approval by mail or in person.

An order of **default judgment or dismissal** may be issued in the following circumstances:

- Default Hearings and Awards A case may be set for default judgment upon the request of the employee if the employer/insurer has failed to appear and/or defend the claim.
- Voluntary Dismissals A claim for compensation may be voluntarily dismissed by the employee as to any party, or the case as a whole.
- Dismissal for Failure to Prosecute Cases in which no party has requested a setting in one year will automatically be set on a dismissal docket. The claim for compensation may be dismissed for failure to prosecute if, after notice to the parties, the claimant or the claimant's attorney fails to show good cause as to why the claim should not be dismissed.

2016 Annual Report

Docket Settings & Hearings

		Setting Types				Hearing	Types
office/Docket Location	Counties Covered	Conference	Pre- Hearing	Mediation	Dismissal	Hardship	Final
ape Girardeau Office							
Bloomfield	Stoddard	38	24	81	23	0	2
Cape Girardeau	Bollinger, Cape Girardeau, Perry	213	162	293	115	6	15
Caruthersville	Dunklin, Pemiscot	47	25	116	31	0	5
Farmington	St. Francois, St. Genevieve	168	63	238	88	7	16
Ironton	Iron, Madison, Reynolds, Washington	62	44	103	41	1	7
New Madrid	New Madrid	80	107	106	28	0	0
Popular Bluff	Butler, Carter, Ripley, Wayne	95	39	245	48	0	0
Sikeston	Mississippi, Scott	120	107	167	38	6	7
efferson City Office							
Boonville	Cooper, Howard	38	16	0	7	0	0
Camdenton JC	Camden, Hickory, Morgan	101	57	0	10	1	6
Columbia	Boone	399	233	0	32	4	15
Eldon (Held in J.C.)	Miller	43	10	0	4	1	1
Fulton (Held in J.C.)	Callaway	101	105	0	28	2	26
Hannibal	Clark, Lewis, Marion, Pike, Ralls	187	415	0	13	5	6
Hermann	Gasconade	15	31	0	11	0	2
Jefferson City	Cole, Maries, Moniteau, Osage	211	226	722	44	5	20
Kirksville	Adair, Knox, Putnam, Schuyler, Scotland, Sullivan	124	123	0	10	0	0
Macon	Linn, Macon, Shelby	106	53	0	4	3	0
Marshall	Saline	97	41	0	2	1	4
Mexico	Audrain, Montgomery	101	257	0	8	1	4
Moberly	Chariton, Monroe, Randolph	90	32	0	4	1	4
Rolla	Crawford, Dent, Phelps	112	158	0	23	0	6
Sedalia	Benton, Pettis	131	68	0	37	5	3

			Hearing Types				
Office/Docket Location	Counties Covered	Conference	Pre- Hearing	Mediation	Dismissal	Hardship	Final
lamlin Office							
Joplin Office Joplin	Jasper	408	1,662	327	42	4	30
·	Barton, Cedar, Dade,			0	9	0	0
Lamar	Vernon	131	431	_	9		
Monett	Barry, Lawrence	156	858	0	18	0	0
Neosho	McDonald, Newton	122	419	0	14	0	0
Cansas City Office							
Clinton	Bates, Henry, Johnson, St. Clair	96	28	0	100	0	4
Kansas City	Cass, Jackson, Southern Platte	1,133	285	1,988	1,798	203	541
Lexington	Lafayette, Ray	62	12	0	10	0	0
Trenton	Grundy, Mercer	0	0	0	0	0	1
pringfield Office							
Branson	Stone, Taney	114	82	37	13	0	0
Lebanon	Laclede, Pulaski, Wright	106	144	63	21	0	4
Springfield	Christian, Dallas, Greene, Polk, Webster	709	817	365	43	24	61
West Plains	Douglas, Howell, Oregon, Ozark, Shannon, Texas	73	100	39	8	1	0
th Jaconh Office							
Bethany	Daviess, Harrison	15	10	0	2	0	0
·							
Chillicothe	Caldwell, Carroll, Livingston	76	41	8	7	1	1
Maryville	Atchison, Gentry, Holt, Nodaway, Worth	98	42	5	3	0	0
St. Joseph	Andrew, Buchanan, Clinton, DeKalb	425	617	98	68	9	25
St. Louis Office							
Festus STL	Jefferson	133	474	200	19	8	15
Union/Washington STL	Franklin	158	967	138	33	1	15
St. Charles STL	St. Charles	350	4654	903	266	11	36
St. Louis	City of St. Louis, St. Louis County	1523	14,018	5,085	732	42	341
Warrenton STL	Lincoln, Warren	56	584	118	59	1	10
TOTALS		8,623	28,641	11,445	3,914	354	1,23

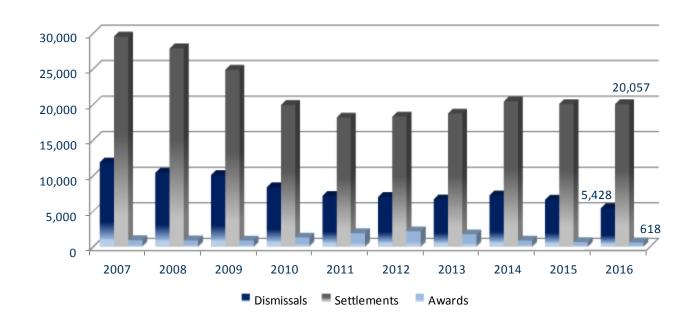
^{*} Note: Last minute cancellations of scheduled hearings, due to settlement or requests for continuance, are not recorded in the DWC database. Therefore, the number of hearings actually conducted is less than shown here.



Case Resolutions

In 2016, 26,103 workers' compensation cases were resolved by an ALJ. The number of settlements reached decreased by .1 percent, while the number of awards issued decreased by 8.8 percent and the number of dismissals decreased by 18.3 percent from 2015.

Workers' Compensation Case Resolutions 2007 - 2016



Section 287.460 requires all awards to be issued by the administrative law judge within 90 days of the last day of the hearing on the case. The hearing is generally concluded within 30 days of the commencement of the hearing, unless there are "extraordinary circumstances where a lengthy trial or complex issues necessitate a longer time than 90 days." In 2016, 96 percent of all awards were issued within the statutory time frame.



Tort Victims' Compensation Fund

The Missouri Tort Victims' Compensation Fund (the Fund) was established by legislation passed in 1987. Revenue into the Fund is generated by a portion of money paid as punitive damages in civil lawsuits in Missouri. In 2001, the Missouri General Assembly enacted legislation authorizing claims to be made against the Fund, giving the Division the duty to evaluate those claims, and set up criteria for the evaluation of those claims.

The purpose of the Fund is to help compensate people who have been injured due to the negligence or recklessness of another, such as in a motor vehicle collision or a hunting accident, and who have been unable to obtain full compensation because the party at fault had no insurance, or inadequate insurance, or has filed for bankruptcy, or for other reasons specified in the law.

There were 39 claims filed during the 2014 Annual Claims Period, 31 of which were successful; two of the unsuccessful claims were appealed. Hearings for both of the denied cases took place in 2015 and the administrative law judges for both cases affirmed the denials. One of the cases proceeded to appeal such decision to the Missouri Labor and Industrial Relations Commission (LIRC). The LIRC also affirmed the denial. The value of the individual successful claims ranged from \$10,000.00 to \$300,000.00, and the aggregated total of the awarded amounts was \$5,239,184.57. No payments have yet been made on the 2014 Annual Claims Period cases.

36 claims were filed during the 2015 Annual Claims Period. 31 of such claims were successful and 5 claims were denied. The value of the individual successful claims ranged from \$773.20 to \$300,000.00. The aggregated total of the awarded amounts was \$5,467,922.54.

37 claims were filed during the 2016 Annual Claims Period, 13 of which were filed during the last 10 days of 2016 and are under preliminary review. The balance of the Fund as of December 31, 2016 was \$504,227.05.

A history of payments from the Tort Victims Compensation Fund for Annual Claims Periods prior to 2015 can be found at https://labor.mo.gov/DWC/Tort_Victims.

2016 Annual Report

Accomplishments & Initiatives

SECOND INJURY FUND

During CY 2016, the Second Injury Fund was able to remain current with regards to the payment of PTD awards/settlements, and was also able to pay roughly 3,000 held PPD awards/settlements, due to the continuous increase in revenues resulting from the supplemental surcharge in accordance with SB 1. The net result was a reduction in the amount of issued awards/settlements currently being held, due to the financial condition of the fund, from \$42,403,328 at the end of 2015 to \$32,782,104 at the end of 2016.

Interstate Comparison

Workers' Compensation Premium Rate Rankings

Missouri employers pay, on average, the 33rd lowest workers' compensation premium rates in the nation. Missouri's premium rate index is \$1.92 per \$100 of payroll or 104 percent of the national median, which was \$1.85 in 2016. There was negligible change in the national median from 2014.

2016 Ranking	2014 Ranking	State	Index Rate	Percent of Study Median	Effective Date
1	1	California	3.24	176%	January 1, 2016
2	3	New Jersey	2.92	158%	January 1, 2016
3	4	New York	2.83	154%	October 1, 2015
5	2	Connecticut	2.74	149%	January 1, 2016
5	5	Alaska	2.74	149%	January 1, 2016
6	9	Delaware	2.32	126%	December 1, 2015
8	6	Oklahoma	2.23	121%	January 1, 2016
8	7	Illinois	2.23	121%	January 1, 2015
9	20	Rhode Island	2.20	119%	August 1, 2014
10	10	Louisiana	2.11	115%	January 1, 2016
11	11	Montana	2.10	114%	July 1, 2015
12	23	Wisconsin	2.06	112%	October 1, 2015
14	8	Vermont	2.02	110%	April 1, 2015
14	13	Maine	2.02	110%	April 1, 2015
15	17	Washington	1.97	107%	January 1, 2016
17	27	Hawaii	1.96	107%	January 1, 2016
17	12	New Hampshire	1.96	106%	January 1, 2016
18	17	South Carolina	1.94	105%	September 1, 2015
20	21	MISSOURI	1.92	104%	January 1, 2016
20	20	New Mexico	1.92	104%	January 1, 2016
22	20	Minnesota	1.91	104%	January 1, 2016
22	27	North Carolina	1.91	103%	April 1, 2015
23	31	Wyoming	1.87	101%	January 1, 2016
24	24	Iowa	1.86	101%	January 1, 2016
25	29	Alabama	1.85	100%	March 1, 2015
26	17	Pennsylvania	1.84	100%	April 1, 2015
27	32	Georgia	1.80	98%	March 1, 2015
28	14	Idaho	1.79	97%	January 1, 2016
29	38	Mississippi	1.70	92%	March 1, 2015
30	22	Tennessee	1.68	91%	March 1, 2015
32	30	Nebraska	1.67	91%	February 1, 2015
32	25	South Dakota	1.67	91%	July 1, 2015
33	28	Florida	1.66	90%	January 1, 2016
34	34	Michigan	1.57	85%	January 1, 2015
35	41	Colorado	1.56	84%	January 1, 2016
36	40	Kentucky	1.52	82%	October 1, 2015
38	37	Arizona	1.50	82%	January 1, 2016
38	35	Maryland	1.50	82%	January 1, 2016
40	36	Texas	1.45	79%	July 1, 2015
40	33	Ohio	1.45	79%	July 1, 2015
41	39	Kansas	1.41	77%	January 1, 2016
42	45	District of Columbia	1.37	74%	November 1, 2015
43	46	Nevada	1.31	71%	March 1, 2015
44	48	Massachusetts	1.29	70%	April 1, 2014
45	43	Oregon	1.29	69%	January 1, 2016
46	45	Utah	1.27	69%	December 1, 2015
					·
47	48	Virginia	1.24	67%	April 1, 2015
48	43	West Virginia	1.22	66%	November 1, 2015
49	49	Arkansas	1.06	57%	July 1, 2015
50	50	Indiana	1.05	57%	January 1, 2016
51	51	North Dakota	.89	48%	July 1, 2015

MO DWC Contacts

Missouri Division of Workers' Compensation Central Office

P.O. Box 58 Jefferson City, MO 65102-0058 (573) 751-4231

Internet Home Page: <u>www.labor.mo.gov/dwc</u> Toll Free Information Line: (800) 775-2667

Dispute Management Unit

P.O. Box 58 Jefferson City, MO 65102-0058 (573) 526-4951

Fraud and Noncompliance Unit

P.O. Box 1009 Jefferson City, MO 65102-1009 (800) 592-6003

Insurance Unit

P.O. Box 58 Jefferson City, MO 65102-0058 (573) 526-3692

Medical Fee Dispute

P.O. Box 58 Jefferson City, MO 65102-0058 (573) 526-5610 or (573) 522-2546

Missouri Workers' Safety Program

P.O. Box 58 Jefferson City, MO 65102-0058 (573) 526-5757

Rehabilitation and Second Injury Fund

P.O. Box 58 Jefferson City, MO 65102-0058 (573) 526-3505

Religious Exception and Proof of Coverage

P.O. Box 58 Jefferson City, MO 65102-0058 (573) 522-2546 or (573) 526-4941

Local Office Directory

Cape Girardeau

Phone: (573) 290-5757 Fax: (573) 290-5760 3102 Blattner, Suite 101 Cape Girardeau, MO 63701

Columbia

Phone: (573) 817-4242 5900-B Tower Dr. Columbia, MO 65202

Jefferson City

Phone: (573) 751-4231 Fax: (573) 751-2012 3315 West Truman Blvd., P.O. Box 58 Jefferson City, MO 65102

Joplin

Phone: (417) 629-3032 Fax: (417) 629-3035 3311 Texas Ave. Joplin, MO 64801

Kansas City

Phone: (816) 889-2481 Fax: (816) 889-2489 1410 Genessee St., Suite 210 Kansas City, MO 64102-1047

Springfield

Phone: (417) 888-4100 Fax: (417) 888-4105 1736 E. Sunshine, Suite 610 Springfield, MO 65804

St. Joseph

Phone: (816) 387-2275 Fax: (816) 387-2279 525 Jules St. St. Joseph, MO 64501

St. Louis

Phone: (314) 340-6865 Fax: (314) 340-6915 111 North 7th St., Room 250 St. Louis, MO 63101

Additional Contacts

Missouri Department of Insurance, Financial Institutions and Professional Registration (DIFP) Property and Casualty Section P.O. Box 690

Jefferson City, MO 65102-0690 (573) 751-3365 or (800) 726-7390

Internet Home Page: www.insurance.mo.gov

National Council on Compensation Insurance (NCCI) 11430 Gravois Road St. Louis, MO 63126 (314) 843-4001

Customer Service (800) 622-4123 Internet Home Page: **www.ncci.com**



Missouri Department of Labor and Industrial Relations
Division of Workers' Compensation
P.O. Box 58
3315 West Truman Blvd
Jefferson City, MO 65102-0058
Phone: 800-775-2667
E-mail: workerscomp@labor.mo.gov

Website: www.labor.mo.gov/dwc